

RELEASE AND WAIVER OF LIABILITY  
FOR VISITING CLUBS

Club Name: \_\_\_\_\_

Institutional Affiliation: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Telephone: \_\_\_\_\_

Team Official: \_\_\_\_\_

Date(s) of Participation: \_\_\_\_\_

Is your club covered under a group/institutional insurance policy ? Accident/medical \_\_\_\_ Yes \_\_\_\_ no

Liability \_\_\_\_ Yes \_\_\_\_ no

Policy Owner: \_\_\_\_\_

The undersigned hereby agrees that in consideration of Clemson University allowing the undersigned to use University facilities and/or to participate in a club sponsored program, he/she does for himself/herself and his/her heirs, executors, administrators and assigns hereby release, waive, and forever discharge Clemson University, its Board of Trustees and its officers, agents and employees, from any and all liability, claims, demands, actions, or causes of actions arising out of or related to any injury, including death, that may be sustained by the undersigned, or loss or damage to any property belonging to the undersigned, whether caused by the negligence of Releases, or otherwise, while using University facilities and/or participating in a club sponsored program.

The undersigned further hereby agrees to indemnify and hold harmless the Releasee from any loss, liability, damage, or costs, including court costs and attorneys' fees, that he/she may incur as a result of using Clemson University facilities and/or participating in a club sponsored program.

The undersigned hereby voluntarily assumes full responsibility for any risk of personal injury, including death, that may be sustained by him/her, or any risk of loss or damage to property owned by him/her, as a result of his/her use of Clemson University facilities and/or participation in a club sponsored program.

The undersigned hereby certifies that he/she is covered under personal accident/medical insurance, and the undersigned hereby acknowledges that he/she is solely responsible for any medical or other costs arising out of any bodily injury or property damage sustained during his/her use of University facilities and/or participation in a club sponsored program.

<u>Name (print)</u>	<u>Signature</u>	<u>S. Number</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

(over)

[illegible][illegible][illegible]